America is great because of our veterans!

First Annual

Veterans Day Run, Walk or Roll 5-K

Presented by

The VA Employees Association (VAEA) and the Florida Track Club (FTC) to benefit veteran's activities

Tuesday, November 11, 2003, 8:00 a.m.

Malcom Randall VA Medical Center, Gainesville, Florida

Run, Walk or Roll: The 5-K event starts at 8:00 a.m. for wheelchair athletes, 8:05 a.m. for runners and walkers on Tuesday, November 11. The course is a double loop course over mostly flat paved parking lots, roadways and concrete and asphalt sidewalks. Wheelchair athletes may opt to use a non-racing type chair due to curb-cuts and sidewalks. The race starts and finishes by the flagpole at the main entrance entrance of the VA Medical Center.

Entry/Registration:

Pre-registration (postmarked by 10/31/03)		Race Day	
(postmarked by 10	011001	Tall I	
Run/Walk	\$17	\$20	
Run/Walk (no T-shirt option)	\$10	\$17	
FTC or VAEA member	\$15	\$20	
FTC or VAEA member (no T)	\$8	\$17	
Under 17 (no T)	Free	Free	
T-shirt if available	No.	\$8	

Awards:

Male and female age group awards: three deep in 5-year age groups (9 and under through 80 and up).

- · Overall open male/female
- Overall masters male/female
- First third place wheelchair male/female
- First third place walker male/female
- Overall veteran finisher male/female

Door prizes drawn randomly (you must be present to win)

T-shirts guaranteed to pre-registered runners only.

Directions:

The VA Medical Center is located at 1601 SW Archer Rd across from Shands Hospital. There is ample parking on the west-side of the hospital.

Refreshments/Post race party!

Registration:

Mail completed form with entry fee to:

Barry Murphy/5-K race Recreation Therapy (117C) VA Medical Center 1601 SW Archer Road Gainesville, FL 32608

Or register on-line at www.active.com

Make check or money order payable to:

VAEA

Phone: 352-376-1611 extension 6535

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Veterans Day Run, Walk or Roll 5-K					
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Tuesd	ay, November 11, 2003, 8	8:00 a.m., Malco	om Randall VA Medical Co	enter, Gainesv <mark>ill</mark> e, F <mark>lorida</mark>	
5.0					
1	Last Name		First Name		
13.	Street Address		City	State ZIP	
Tele	ephone Age	M F T-SI	nirt Size DOB (MMDDYY)		
FTC Member	I am interested in joining FTC	VAEA Member	I am interested in joining VAE	A CFC Contribution (employees only)	
Veteran	Wheelchair Athlete	Walker	Runner	Fun Run (12 years of age & under)	

I know that running a road race is a potentially hazardous activity. I should not enter and run, walk or roll unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the race. I assume all risks associated with participating in this event including but not limited to: falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone acting on my behalf, waive and release the Department of Veterans Affairs, VA Employees Association, the Florida Track Club, volunteers and all other sponsors, their representatives and successors, from all claims and liabilities of any kind arising out of my participation in this event even though that liability might arise out of negligence or carelessness on the part of the persons named in this waiver. I understand and agree to abide by the insurance restrictions which prohibit the use of radio headsets or other portable sound systems, and wheeled conveyances (excluding wheelchairs but including skateboards, roller skates or blades, baby joggers or strollers, bicycles, etc.). Animals are prohibited except for trained guide dogs used by blind runners. Illegible applications may result in disqualification. I further grant permission to this race and organization conducting the race and/or agents authorized by them to use and photographs, videotapes, motion pictures, recordings or any other event for any purpose.

I HAVE READ THE ABOVE RELEASE AND UNDERSTAND THAT I AM ENTERING THIS EVENT AT MY OWN RISK

__ Date